March 13, 2021

Testimony on S.B.1 AN ACT EQUALIZING COMPREHENSIVE ACCESS TO MENTAL, BEHAVIORAL AND PHYSICAL HEALTH CARE IN RESPONSE TO THE PANDEMIC

Public Health Committee March 17, 2021

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Good Day Senator Abrams, Representative Steinberg, Senator Anwar, Senator Kushner, Representative Gilchrest, Senator Hwang, Senator Somers, and Honorable Members of the Public Health Committee:

These comments refer to sections 19 and 33 of this bill.

I have been a clinical social worker in a School Based Health Clinic with Community Health Center, Inc. for over 12 years of my 30 plus years of clinical practice. I provide assessment of behavioral health issues in vulnerable children that affect home, school and community behavior and functioning through intakes with parents integrating translator services as appropriate. Individual, family and group therapy, referrals to Psychiatrists and APRNs for medication, coordination with PCP's as necessary and as well with school staff and other outside services are all included. Dental assessments occur twice every year in school.

I focus on anxiety and stress in an elementary school population for over 16 years due to many inequities that remain in 2021. This year the level of stress has been worldwide where nowhere is safe and because the pandemic is invisible, with no bookends of entry and completion, we are constantly on edge. The huge losses and lack of control applies to elementary school children and their families in regards to scarce resources, deaths, unavailable family, friends and school.

I have recently found a study at the U of Oxford that states 1 in 5 Covid 19 patients have a depression, anxiety and/or insomnia diagnosis within 3 months of getting a Covid diagnosis. In addition, 65% of those with a pre-existing Behavioral Health diagnosis are more likely diagnosed with Covid 19. They wonder if Behavioral Health diagnoses should be considered a risk factor. This is alarming to me, as I do not think we are ready to handle this need.

All of the children I see have a BH diagnoses as do some of their parents. I provide support this year to parents and children in families suffering from diagnoses of Covid 19, which resulted in being isolated and/or quarantined. In one family, the mom had severe symptoms and was alone while the children, who also had Covid 19 with mild symptoms, went with their dad to a hotel for the holidays. Dad lived with his parents and did not want them exposed to the virus. As I can provide tele-health this year, both audio by phone and video by zoom, I could reach out to all family members during a devastating time in their lives. I called the mom briefly a few times, as it is hard to talk when it is hard to breathe. She said she would never forget me for these calls and support during a time that she thought she was going to die. I continue to support her child in his academics, socially through zoom groups, individually to help his stress level and in family/parent as needed for the parent with more long-term COVID effects.

I encourage the committee to allocate additional funding for existing School Based Health Centers and the expansion of School Based Health Clinics in other underserved areas.